PTC/SB/17 (10-07)

Approved for use through 96/30/2010, OME 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless at displays a valid GMB coatric number.

GIIGO ELO Papera GIA TORO	AND THE PERSON NAMED IN CO.	SOL THE PROPERTY MADE (	uquneu III	Triophorius et a 1,000°C ac		ANT WHERE & DISPLA		a covero nambe
Effective on 12/09/2004. Foes pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL				Complete if Known Application Number 10/580,652-Conf. #5/62				
				<del></del>		September 25		
				·				
For FY 2008			First Named Inventor   Hisayoshi ITO Examiner Name   G. Mesh					
Applicant claims small entity status. See 37 CFR 1 27				Art Unit 1711				
TOTAL AMOUNT OF PAYMENT		(8) 130.00		Attorney Docket No.		2224-0260PUS1		
METHOD OF PAYME	NT toback at	that apply)						
Check Credit		Money Order	No	1,,,,,,	please idensi			
X Deposit Account the	posit Accessit Nur	nter 02	2448	Deposit	Account Name	Birch, Stew	art, Kolaso	th & Birch,
	s) indicated b	elow (s) or underpay		Charg		dicated below.		he filing fee
FEE CALCULATION						•		
1. BASIC FILING, SEARC								***************************************
Application Type	Fee (\$)	VG FEES Small Entity Fee (\$)	Fee (S		Fee (\$)	ATION FEES Small Entity Ess.(5)	Fees Paid (\$)	
Utility	310	155	510	255	210	105		
Design	210	105	100	50	130	65		
Plant	210	105	310	155	169	80	***************************************	
Reissue	310	155	510	255	620	310	***************************************	
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FEES								Small Entity
Fee Description Each claim over 20 (inclu	ding Reissner	6)					Fee (\$) 50	Fee (5) 25
Each independent claim over 3 (including Reissues)							210	105
Multiple dependent claim		,					370	185
Total Claims Extra	a Claims	Fee (\$)	Fee F	Pald (\$)	M	altiple Depend		
20 -24 = 0 x >  HP = Nonset number of total claims paid for # greater than 20.						Fee Paid (		
-		Fee (\$)	Fee F	aid (\$)				_
HP = highest number of indepe		ld for, if greater that	n 3.					
<ol> <li>APPLICATION SIZE FE If the specification and d listings under 37 CPR sheets or fraction ther</li> </ol>	rawings exce (1.52(e)), the	application siz	e fee du	e is \$260 (\$130 f				0
Total Sheets - 100 ×	Extra Sheets			dditional 56 or frac			Fee.	Paid (S)
4. OTHER FEE(S)			************	(course sep to a with	en santaness		Fone	Paid (\$)
Non-English Specifica	tion. \$130 fr	e (no small ent	ity disco	semt)			LEES	> 0014 (@)
Other (e.g., late filing s							13	10.00
SUBMITTED BY								
Signapure CAX	Just .	CLARFICES	75	Registration No. (Attorney/Agent)	28,977	Telephone	(703) 20	5-8000
Name (Print/Type) Gerald I	A. Murphy, .	r. fr.	· ·			Date 1	Vovember	27, 2007
		·····				-d		····